# P.L.A.Y. CAMP<sup>2005</sup>

**P**ositive **L**earning **A**ctivities for **Y**outh for kids who have COMPLETED <u>K-5th grade</u>.

Develop confidence, teamwork and sportsmanship while maintaining academic skills through educational activities, games, sports, crafts and field trips. Character Counts will be a key component of P.L.A.Y. Camp. Weekly fee includes all activities and an afternoon snack. Free breakfast and lunch provided.

# June 13 - August 12 Monday - Friday

### Location:

F Street Community Center 1225 F Street 441-7951

### Registration requires payment for the first week.

Registration is limited. Weekly payment due by 5:00 pm on Tuesday of the prior week. We mail confirmation, program information, total fee due, and payment schedule after processing.

### Weekly Base Fee:

9:00 am - 3:00 pm \$52.00/per child 7:30 - 9:00 am extension \$5.00/per child Free Elementary Drop-In Hours begin at 3:00 pm

## **Registration Deposit:**

Registration requires an \$10 per child, per week, nonrefundable deposit. Registration is limited. Deposit is required for all families. Registration confirmation, program information, total fee due, and payment schedule will be mailed after processing.

### **Payment Schedule:**

Balance due as follows:

Week 1-due time of registrationWeek 5-due Tuesday, July 5Week 2-due Tuesday, June 14Week 6-due Tuesday, July 12Week 3-due Tuesday, June 21Week 7-due Tuesday, July 19Week 4-due Tuesday, June 28Week 8-due Tuesday, July 26

# Payment Information:

Mail or bring payment to:

"F" Street Community Center 1225 F Street Lincoln NE 68508

### **Discounts Available:**

If two or more children from the same family are enrolling the first is full fee and the rest will have a \$5 discount off the base fee. We also have a Sliding Fee Rate available. Title Twenty is accepted.

Week 9-due Tuesday, Aug 2



# Registration begins March 7, 2005

Registration is limited. Waiting lists will be maintained. Register for only the weeks and times you want!

Participant's Name	Grade	Completed	Birthdate	
Address				Zip
Parent's Name			Hor	ne Phone #
Day Phone #		(Name of	Parent at Da	y Phone #)
Another person to contact in	case of e	emergency		Phone #
Make checks payable to: Lincoln Parks & Recreation		k the weeks and emplete one re		
Return to:	Week#	Dates	7:30-9:00	9:00-3:00
"F" St. Community Center	1	June 13 - 17		
1225 F Street	2	June 20 - 24		
Lincoln NE 68508	3	June 27 - July 1		
NOTE: Include the \$10	4	July 5 - 8		
per child, per week	5	July 11 - 15		
nonrefundable deposit with payments.	6	July 18 - 22		
with payments.	7	July 25 - 29		
	8	August 1 - 5		
	9	August 8 - 12		
	Am	ount Enclosed:		
	Click #			
T-Shirt Size: Youth Med. Youth	<b>.</b>	Check #		

Waiver and Release of All Claims: For and in consideration, the undersigned parent(s) or guardian(s) of the participant in the Recreation PLAY Camp Program, I/We recognize and acknowledge that there are certain risks of physical injury and I/We agree to assume the full risk of any injuries, including death, or loss which the undersigned or my minor child/ward may sustain as a result of participating in any and all activities connected with or associated with such program. I/We do hereby declare that I/We waive all claims of whatsoever kind or nature against the City of Lincoln and the Parks and Recreation Department, its officials, officers, agents, employees and volunteers from any and all claims arising from injuries, including death, damage or loss which I/We or my minor child or ward may incur or may accrue to me or my minor child or ward on account of participation in the activities of this program. I/We further agree to indemnify and hold harmless and defend the City of Lincoln and the Parks and Recreation Department, its officials, officers, agents, employees and volunteers from any and all claims resulting from injuries, including death, damages and losses sustained by the undersigned or my minor child or ward or arising out of this program. I/We have read and understand the above Waiver and Release of All Claims and understand the effect of the relinquishment.

Name	Relationship	Date
Name	Relationship	Date